

FIELD REFERRAL TO BUREAU OF INVESTIGATIONS

REFERRAL DATE: _____

BOI CASE NO. _____

EMPLOYER NAME: _____ INSPECTION DATE(S): _____

EMPLOYER ADDRESS: _____

IS SUPPORTING DOCUMENTATION ATTACHED: _____ YES _____ NO

GROUND(S) FOR BOI REFERRAL: (CIRCLE ONE)

1. Serious willful violation involving death or bodily impairment.
2. Knowing or negligent serious violation involving exposure to toxic materials or serious injury.
3. Repeated violation which creates a real and apparent hazard to employees.
4. Failure or refusal to abate violative conditions within the time established for correction, which failure creates a real and apparent hazard to employees.
5. Destroying, defacing, removing, obstructing or working in violation of an Order Prohibiting Use.
6. Submission of a Fraudulent Statement of Abatement.
7. Other: _____

CSE/IH NAME: _____ TELEPHONE: _____

COMMENTS: _____

DISTRICT MANAGER: _____ TELEPHONE: _____

APPROVE: __ DISAPPROVE: __ DATE: _____

COMMENTS: _____

REGIONAL MANAGER: _____ TELEPHONE: _____

APPROVE: __ DISAPPROVE: __ DATE: _____

COMMENTS: _____
